**PROFIT CORPORATION ANNUAL REPORT** 1999

1. Corporation Name



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

59 FEB 19 AM 10: 51

SECRETARY OF STATE VALLATIONSEE, FLORIDA

DIAMOND SERIES ENTERPRISES, INC.				MALATER SEE, ELORIDA	
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					8(9): E.E.II B.E.II 8(9): B.E.II (90)
Principal Place	e of Business	Mailing Address	<del></del>	r seemen (16t thirk teile idini bien dibit mihit	#1811 #1911 B1811 B1811 #1811 1891
13625 US 19		GEORGE N. KLIMIS, P.A			
SUITE 404A		30 NO. RING AVE., STE 400			
HUDSON FL 34667 US		TARPON SPRINGS FL 3468 US	9	DO NOT WRITE IN THIS	S SPACE
•		00		3. Date Incorporated or Qualifed	
2. Principal P	lace of Business	2a. Mailing Address		07/08/1982 4. FEI Number	TANKS ES
21	iboc of bosiness	26		59-2206923	Applied For
Suite, Apt. #, etc.		Suite Apt. #, etc.		39 2500353	Not Applicable \$8.75 Additional
22		27		5. Certifcate of Status Desired []	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year In	···
24	25	29	30	Personal Property Tax.	Yes XNo
	9. Name and Address of Curren	t Registered Agent		10. Name and Address of New Registered	l Agent
M M	MC CEODOE N		81 Name		
KLIMIS, GEORGE N 30 NORTH RING AVENUE			82 Street Add	ress (P.O. Box Number is Not Acceptable)	
	E 400			,	
T	PON SPRINGS FL 34689		83		
i Ani	ron springs of 34009		84 City		85 Zip Code
			1-1	Fl	_
11. Pursuant	to the provisions of Sections 607.0502	2 and 607.1508, Florida Statute	es, the above-named corp	poration submits this statement for the purpose o ion's board of directors. I hereby accept the appo	f changing its registered
agent. I a	m familiar with, and accept the obligat	ions of, Section 607.0505, Flori	ida Statutes.	ion's poard or directors. Thereby accept the appoint	milment as registered
SIGNATURE					
	Signature, typed or printed name of registered agen OFFICERS AN		Registered Agent signature require		ND 010507000 11140
12.	PTD OFFICERS AN	D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	NO DIRECTORS IN 12
NAME		[ ] BELETE	117715		·
		[] DELETE	11 TITLE		[] Change
	MEHURON, THOMAS C	[] DELETE	1.2 NAME	600002778	☐Change ☐Addition
STREET ADDRESS	MEHURON, THOMAS C 10400 HILLTOP DRIVE	[] DELETE	1.2 NAME 1.3 STREET ADDRESS	600002778 -02/17/93(	[]Change
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or suppliedmental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed or of my attachment with all other like empowered.

SIGNATURE:

2/9/99 (787) 863-1862